

507-4-NOL

## MPCI NOTICE OF PP OR DAMAGE OR LOSS

**GREAT AMERICAN**  
 INSURANCE COMPANY  
 Crop Insurance Division

**CROP**  
**YEAR** 2019

<b>AGENCY NAME &amp; ADDRESS</b> SPARTAN INSURANCE -MAIN 3 806 BOTSFORD RD PETOSKEY, MI 49770  Phone: (855) 347-1066 Fax: (231) 347-1067	<b>PROFIT CENTER NAME &amp; ADDRESS</b> 22 Peoria 1315 W. Commerce Drive Peoria, IL 61615-1462  Phone: (800) 345-1065 Fax: (309) 689-1055
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<b>INSURED NAME &amp; ADDRESS</b> NEW HEIGHTS FARM II, LLC 6241 RANSOM ST ZEELAND, MI 49464	<b>POLICY NO.</b> 2019-MI-084-1139527 <b>CLAIM NO.</b> 2019-1139527-03 <b>HOME/OFFICE PHONE</b> (616) 875-7880 <b>MOBILE PHONE</b> (616) 610-2886 <b>EMAIL</b>  <b>Best time to contact insured:</b> Contact Nick Boersen at 616-610-2886
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<b>ADJUSTER NAME &amp; PHONE</b> SHARON SHOCK Phone: (260) 341-4412	<b>SUPERVISOR NAME &amp; PHONE</b> SHARON SHOCK Phone: (260) 341-4412
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<b>THIS IS A NOTICE OF:</b> <input type="checkbox"/> PREVENTED PLANTING <input type="checkbox"/> REPLANT (if replant on any unit is greater than 50 acres) <input type="checkbox"/> REPLANT (SELF CERT.<50 ACRES) <input checked="" type="checkbox"/> PROBABLE LOSS <input type="checkbox"/> DAMAGE ONLY (appears production will exceed guarantee at this time) <input type="checkbox"/> IMMEDIATE INSPECTION REQUESTED - Reason:	<b>POLICYHOLDER INTENTION:</b> <input type="checkbox"/> REPLANT <input checked="" type="checkbox"/> TO HARVEST <input type="checkbox"/> TO CHOP/SILAGE <input type="checkbox"/> LEAVE FOR COVER <input type="checkbox"/> PLANT TO ANOTHER CROP <input type="checkbox"/> UNKNOWN AT THIS TIME	<input type="checkbox"/> PASTURE <input type="checkbox"/> HAY <input type="checkbox"/> DIRECT MKT.CROP <input type="checkbox"/> DESTROY <input type="checkbox"/> OTHER (explain in Remarks)
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COUNTY	CROP	UNIT	ACRES	LEGAL DESCRIPTION / FSN	EST./ AC. PROD.	CAUSE OF LOSS	DATE OF DAMAGE	DATE OF NOTICE	DATE OF HARVEST
Eaton	Corn (41)	00010001	148.94	13-002N-004W / 14-002N-003W / 13-002N-004W**		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010002	0.00	33-001N-003W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010002	0.00	30-003N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010003	0.00	23-002N-004W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010004	0.00	23-002N-004W / 24-002N-004W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010005	0.00	18-003N-003W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010005	0.00	05-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010006	0.00	07-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010007	0.00	09-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010008	0.00	21-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010009	0.00	07-001N-003W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010009	0.00	26-001N-002W / 27-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010010	0.00	09-001N-003W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010011	74.68	24-003N-004W / 24-003N-004W / 24-003N-004W**		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010011	0.00	11-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010012	0.00	14-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010013	143.02	01-001N-002W / 01-001N-002W / 06-001N-001W**		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010014	0.00	22-001N-003W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010015	0.00	15-001N-002W / 32-002N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Eaton	Corn (41)	00010016	0.00	21-002N-003W		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010016	537.26	29-002N-002W / 29-002N-002W / 30-002N-002W**		Excess Moisture/Precip	10/31/2019	12/11/2019	
Ingham	Soybeans (81)	00010017	0.00	28-001N-002W		Excess Moisture/Precip	10/31/2019	12/11/2019	



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<b>Best time to contact insured:</b> Contact Nick Boersen at 616-610-2886		

**\*\* Unit has more legals. Please refer to APH or SOI forms for all legals.**

**NOTE: Refer to Basic Provisions (BP) and the specific Crop Provisions (CP) for more details on notice requirements for acreage prevented from planting, and notice requirements for damage or loss requirements.**

☒ If you have less than 100% share, is the other share insured under a Federal Crop insurance program? ☐ YES ☐ NO ☒ N/A  
 If "Yes" please list the person's name and insurance company (AIP) for which they carry Federal Crop insurance and the policy number if known.

Shareholder's Name	Insurance Company	Policy #
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☐ I (the insured) am an agent, employee, or contractor affiliated with Federal Crop insurance and the policy number if known? ☐ YES ☒ NO

<b>REMARKS / COMMENTS</b> NOL generated by CSHELLENBARGER and received by Great American on 12/11/2019 at 12:02:22 Soybeans are all sold and delivered and ready to have the claim settled. Eaton Corn has been harvested and insured would like to wait until all corn is harvested to work on corn claims.	<b>COMPANION POLICIES</b>
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Insured's Signature

Date Signed

Date of Notice

## COLLECTION OF INFORMATION AND DATA (PRIVACY ACT) STATEMENT

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. 552a): The Risk Management Agency (RMA) is authorized by the Federal Crop Insurance Act (7 U.S.C. 1501-1524) or other Acts, and the regulations promulgated thereunder, to solicit the information requested on documents established by RMA or by approved insurance providers (AIPs) that have been approved by the Federal Crop Insurance Corporation (FCIC) to deliver Federal crop insurance. The information is necessary for AIPs and RMA to operate the Federal crop insurance program, determine program eligibility, conduct statistical analysis, and ensure program integrity. Information provided herein may be furnished to other Federal, State, or local agencies, as required or permitted by law, law enforcement agencies, courts or adjudicative bodies, foreign agencies, magistrate, administrative tribunal, AIPs contractors and cooperators, Comprehensive Information Management System (CIMS), congressional offices, or entities under contract with RMA. For insurance agents, certain information may also be disclosed to the public to assist interested individuals in locating agents in a particular area. Disclosure of the information requested is voluntary. However, failure to correctly report the requested information may result in the rejection of this document by the AIP or RMA in accordance with the Standard Reinsurance Agreement between the AIP and FCIC, Federal regulations, or RMA-approved procedures and the denial of program eligibility or benefits derived therefrom. Also, failure to provide true and correct information may result in civil suit or criminal prosecution and the assessment of penalties or pursuit of other remedies.

**Non-Discrimination Policy** In accordance with Federal law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating on the basis of race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs).

**To File a Program Complaint** If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [www.ascr.usda.gov/ad-3027-usda-program-discrimination-complaint-form](http://www.ascr.usda.gov/ad-3027-usda-program-discrimination-complaint-form), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to the U.S. Department of Agriculture, Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). **Persons with Disabilities** Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible State or local Agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. Persons with disabilities, who wish to file a program complaint, please see information above on how to contact the Department by mail directly or by email.

